

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PHYLLIS SCHLAFLY'S EAGLE PAC

ADDRESS (number and street)

7800 BONHOMME AVENUE

Check if different
than previously
reported. (ACC)

CLAYTON

MO

63105

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00625285

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

DC

5. Covering Period

M M / D D / Y Y Y Y Y Y
10 01 2016

through

M M / D D / Y Y Y Y Y Y
11 28 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Martin, Ed, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Martin, Ed, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 08 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

PHYLLIS SCHLAFLY'S EAGLE PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	10650.88	
(c) Total Receipts (from Line 19)	77000.00	204400.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	87650.88	204400.00
7. Total Disbursements (from Line 31).....	79688.90	196438.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7961.98	7961.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	35035.23	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

PHYLLIS SCHLAFLY'S EAGLE PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	77000.00	204400.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	77000.00	204400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	77000.00	204400.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	77000.00	204400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	77000.00	204400.00

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3779.50	15528.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3779.50	15528.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	75909.40	180909.40
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	79688.90	196438.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79688.90	196438.02

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	77000.00	204400.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	77000.00	204400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3779.50	15528.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	3779.50	15528.62

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

Two disbursements were incorrectly reported as independent expenditures on a 24-Hour Report filed on 10/31/16. That 24-Hour Report has been amended to remove those independent expenditures. The amounts are reported herein as issue advertisements.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PHYLLIS SCHLAFLY'S EAGLE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bartlett, Patricia, , ,

Mailing Address PO Box 9214

City

Rancho Sante Fe

State

NM

Zip Code

92067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info requested per best effort

Occupation (for Individual)

Info requested per best efforts

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

22500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period

22500.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Phyllis Schlafly's American Eagles

Mailing Address 7800 Bonhomme Ave

City

Clayton

State

MO

Zip Code

63105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 19 / 2016

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period

45000.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Phyllis Schlafly's American Eagles

Mailing Address 7800 Bonhomme Ave

City

Clayton

State

MO

Zip Code

63105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

54500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period

9500.00

☐

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

77000.00

TOTAL This Period (last page this line number only)..... ►

77000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PHYLLIS SCHLAFLY'S EAGLE PAC

Full Name (Last, First, Middle Initial)

A. SMPS Consulting LLC

Mailing Address 2214 Glenridge Lane

City
CummingsState
GAZip Code
30041Purpose of Disbursement
Issue advertising regarding TPP

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2016					

FEC Identification Number

C

Transaction ID : SB21B.4181

Amount of Each Disbursement this Period

3728.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3728.50

TOTAL This Period (last page this line number only).....▶

3728.50

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 17

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

PHYLLIS SCHLAFLY'S EAGLE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ForAmerica

Nature of Debt (Purpose):

Social media advertising buy running 11/4 - 11/8

Mailing Address PO Box 497

City
CliftonState
VAZip Code
20124

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4199

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ForAmerica

Nature of Debt (Purpose):

Estimate of social media advertising buy for 11/5 - 11/8 ads

Mailing Address PO Box 497

City
CliftonState
VAZip Code
20124

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4239

Amount Incurred This Period

28000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

28000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Interactive Communications, LLC

Nature of Debt (Purpose):

Phone calls

Mailing Address 2328 Appaloosa Trail

City
High RidgeState
MOZip Code
63049

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4205

Amount Incurred This Period

1945.63

Payment This Period

0.00

Outstanding Balance at Close of This Period

1945.63

1) **SUBTOTALS** This Period This Page (optional)..... ►

32445.63

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 17

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

PHYLLIS SCHLAFLY'S EAGLE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Interactive Communications, LLC

Nature of Debt (Purpose):
Phone calls

Mailing Address 2328 Appaloosa Trail

City

High Ridge

State

MO

Zip Code

63049

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4201

Amount Incurred This Period

89.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

89.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McKinnon Publishing Co.

Nature of Debt (Purpose):
Production of online ad

Mailing Address 4575 Viewridge Avenue

City

San Diego

State

CA

Zip Code

92123

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4197

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

2589.60

2) TOTALS This Period (last page this line number only)..... ►

35035.23

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

35035.23

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 11 OF 17
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00625285 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item America Direct, Inc.				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1272 Corporate Park Dr. Second Floor				Amount <div style="border: 1px solid black; padding: 2px; font-size: small;"> 4321.38 </div>	
City Forest		State VA		Zip Code 24551	
Purpose of Expenditure Creation of poster and shipping of posters				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: small;">004</div>	
Name of Federal Candidate: TRUMP, DONALD J., , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; font-size: small;">162367.98</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item Facebook				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1601 Willow Road				Amount <div style="border: 1px solid black; padding: 2px; font-size: small;"> 227.76 </div>	
City Menlo Park		State CA		Zip Code 94025	
Purpose of Expenditure Online advertising through 11/7 - actual amount				Category/Type <div style="border: 1px solid black; padding: 2px; font-size: small;">004</div>	
Name of Federal Candidate: TRUMP, DONALD J., , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; font-size: small;">162595.74</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">4549.14</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: small;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; font-size: small;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Martin, Ed, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 12 OF 17
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00625285 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Full Name of Payee Facebook			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 04 / 2016 </div>
Mailing Address 1601 Willow Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 500.61 </div>		Transaction ID : SE.4148
City Menlo Park		State CA	Zip Code 94025	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 14 / 2016 </div>	
Purpose of Expenditure Online advertising through 11/8 - actual			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: TRUMP, DONALD J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 192096.35 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►
Full Name of Payee ForAmerica			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 05 / 2016 </div>
Mailing Address PO Box 497			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 28000.00 </div>		Transaction ID : SE.4236
City Clifton		State VA	Zip Code 20124	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Purpose of Expenditure Social media advertising buy for ads running 11/5 - 11/8 - estimate			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: TRUMP, DONALD J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 30589.60 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 500.61 </div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 500.61 </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Martin, Ed, ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 08 / 2016 </div>		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 13 OF 17
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00625285 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee ForAmerica <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>04</div> <div>2016</div> </div>		
Mailing Address PO Box 497			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>		
City Clifton	State VA	Zip Code 20124	Transaction ID : SE.4238 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Social media advertising buy running 11/4 - 11/8		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TRUMP, DONALD J., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">33089.60</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
Full Name of Payee iHeartMedia Inc. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>11</div> <div>07</div> <div>2016</div> </div>		
Mailing Address 200 E Basse Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1000.00</div>		
City San Antonio	State TX	Zip Code 78209	Transaction ID : SE.4166 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Purchase of radio ads		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TRUMP, DONALD J., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">191595.74</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1000.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Martin, Ed, , ,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>12</div> <div>08</div> <div>2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 17
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00625285 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Interactive Communications, LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2328 Appaloosa Trail			<input type="text"/> / <input type="text"/> / <input type="text"/>		
City High Ridge	State MO	Zip Code 63049	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 89.60 </div>		
Purpose of Expenditure Phone calls		Category/ Type <input type="text"/> 004	Transaction ID : SE.4225 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TRUMP, DONALD J., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2589.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Interactive Communications, LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2328 Appaloosa Trail			<input type="text"/> / <input type="text"/> / <input type="text"/>		
City High Ridge	State MO	Zip Code 63049	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1945.63 </div>		
Purpose of Expenditure Phone calls		Category/ Type <input type="text"/> 004	Transaction ID : SE.4226 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: BLUNT, ROY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> District: _____ State: MO		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1945.63			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Martin, Ed, , , [Electronically Filed]
 Signature Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00625285 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item SMPS Consulting LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 2214 Glenridge Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19957.00</div>		
City Cummings	State GA	Zip Code 30041	Transaction ID : SE.4132 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">21</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Purpose of Expenditure Creation and sending of emails from 10/31 - 11/8		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support TRUMP, DONALD J., , , <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">19957.00</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item SMPS Consulting LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Mailing Address 2214 Glenridge Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19957.00</div>		
City Cummings	State GA	Zip Code 30041	Transaction ID : SE.4133 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">21</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Purpose of Expenditure Creation and sending of emails 10/31 - 11/8		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support CLINTON, HILLARY CLINTON/K, , , <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">158046.60</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	39914.00
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	
(a) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Martin, Ed, , ,

Signature

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

12

08

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 17
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PHYLLIS SCHLAFLY'S EAGLE PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00625285 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item SMPS Consulting LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2214 Glenridge Lane			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14000.00</div>		
City Cummings	State GA	Zip Code 30041	Transaction ID : SE.4154 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Production and sending of emails 11/5 - 11/8		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TRUMP, DONALD J., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">176595.74</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee <input type="checkbox"/> Memo Item SMPS Consulting LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2214 Glenridge Lane			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14000.00</div>		
City Cummings	State GA	Zip Code 30041	Transaction ID : SE.4156 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Production and sending of emails 11/5 - 11/8		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: CLINTON, HILLARY CLINTON/K, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">190595.74</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

(a) SUBTOTAL of Itemized Independent Expenditures	28000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	75909.40

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Martin, Ed, , , [Electronically Filed]
 Signature Date / /